

EMS TRAINING STANDARDS

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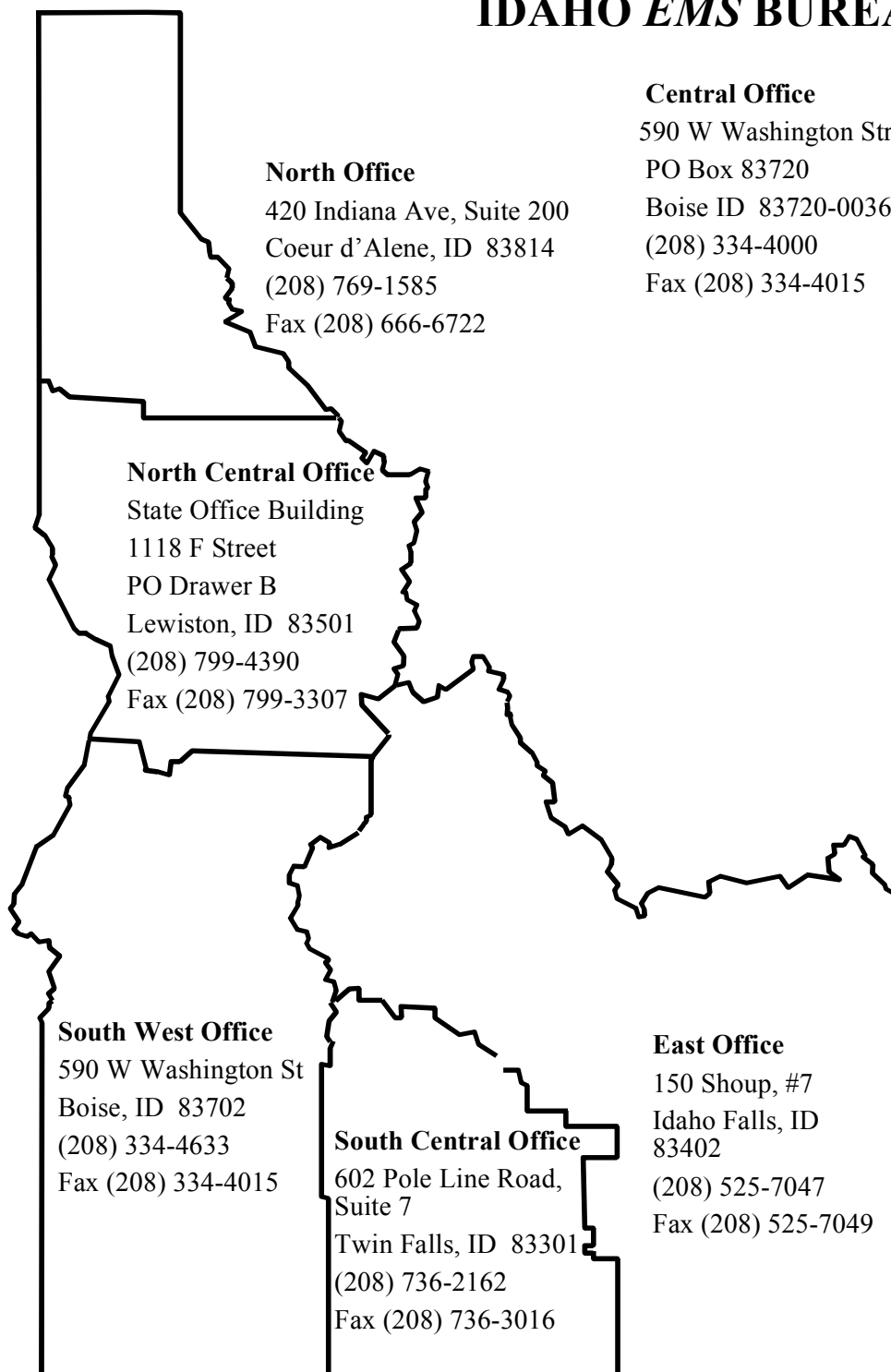
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IDAHO *EMS* BUREAU



DEFINITIONS

Affective Training Objective: A behavioral-based component of the curriculum.

Allied Health Care Professional: An individual certified or licensed by a professional licensing board.

Approved Course: A course for initial certification or refresher training that has been authorized by the EMS Bureau and issued a unique course identification number.

Approved Curriculum: A document approved by the State Health Officer containing an instructor guide, course objectives and declarative material for a defined level of training.

Certification Examination: A test of entry level knowledge corresponding to the level of certification sought which is approved by the State Health Officer and administered by the EMS Bureau.

Certification: A credential issued to an individual by the EMS Bureau for a specific period of time indicating that minimum standards corresponding to one or several levels of EMS proficiency have been met.

Certified Personnel: Individuals who have completed training and successfully passed examinations for training and skills proficiency in one or more levels of emergency medical services and possess current EMS certification credentials.

Classroom Training Facility: The physical location that will be utilized to conduct the didactic training required for the course.

Clinical Training: The training component within an approved course where the student learns to apply the course objectives in the clinical environment, under the direct supervision of an approved preceptor.

Clinical Training Site: An appropriate location and environment for the purpose of providing precepted training to meet the objectives of the approved training course.

Cognitive Training Objective: A knowledge-based component of the curriculum.

Course Coordinator: A representative of the sponsoring agency who is responsible for overall administrative management of the course.

Course Medical Director: A licensed Idaho physician who agrees to oversee training courses as described within the *EMS Training Standards Manual*.

Continuing Education: Prepared training sessions related to the objectives of the initial training course curriculum or a logical progression of those objectives.

Didactic Training: Instructional sessions consisting of cognitive and affective objectives of the curriculum.

Field Internship: The educational component within an approved course where the student is evaluated by an approved preceptor while performing actual EMS patient care in the field.

Field Internship Site: Locations where students perform the objectives learned in the classroom on actual EMS patients. Field internship sites are required to be appropriate to objectives of the training program curricula.

Guest Instructor: An individual utilized in a training course for the delivery of specific information based upon having expertise associated with the objectives being taught.

Initial Training Course: A course meeting the training requirements for eligibility to complete an approved examination.

Licensed EMS Agency: Ambulance and non-transport services licensed by the EMS Bureau.

Make-Up Training: Additional training session(s) completed prior to course ending date for any students that missed a scheduled class and associated course objectives.

National Registry of Emergency Medical Technicians (NREMT): An independent, non governmental, not-for-profit registration organization which prepares validated examinations for the states' use in evaluating candidates for certification.

DOT NHTSA NSC: Department of Transportation National Highway Traffic Safety Administration National Standard Curricula, posted at:
www.nhtsa.dot.gov/people/injury/ems/nsc.htm

Patient Contact: Assessment and treatment provided to an EMS patient by a student precepted in clinical or field internship training.

Physician: An individual licensed by the Idaho State Board of Medicine as an MD or DO.

Preceptor: An individual who understands the scope of practice and objectives of a specific training course that provides direct supervision and evaluation in a clinical or field internship training setting.

Primary Instructor: An EMS Bureau approved instructor identified in the course application who has specific training course responsibilities.

Psychomotor Training Objective: The skills-based component of a curriculum.

Re-certification: The process of renewing the certification of an individual.

Refresher Training Course: A course approved by the EMS Bureau as a component of the re-certification process.

Remediation Training: Additional training session(s) completed prior to course ending date for any students that failed to achieve course objectives.

Skills Instructor: An EMS Bureau approved instructor responsible for the delivery and evaluation of the skills objectives of an approved training course.

Student: An individual meeting all training course prerequisites and actively enrolled in an approved training course.

I. TRAINING PROGRAM COMPONENTS

The following components are identified as being the minimal educational components necessary to conduct an approved EMS training course for initial certification and refresher training.

A. Sponsoring Agency

1. Responsibilities of the sponsoring agency are:
 - a) to provide all educational components of the training program,
 - b) to provide the necessary resources to present the training program,
 - c) to assure that all students are presented with a course of study consistent with established educational standards for EMS training programs,
 - d) to recognize and assume the risks and liabilities associated with the presentation of the training program, and
 - e.) to maintain all training records for a minimum of 4 years after course completion.
2. Eligible sponsoring agencies are:
 - a) currently licensed as an ambulance or non-transport agency by the EMS Bureau,
 - b) an individual or institution in compliance with rules established by State of Idaho Department of Education, or
 - c) recognized governmental entities within the State of Idaho.

B. Personnel

1. The Course Coordinator responsibilities are:
 - a) to represent the sponsoring agency while providing all administrative oversight of the training program,
 - b) to assure that all administrative and educational standards are adhered to throughout the training program,

- c) to be available as the primary source of contact with the EMS Bureau regarding the training programs, and
 - d) to schedule and coordinate all of the training program components.
2. The Primary Instructor responsibilities include:
- a) delivery of skill and lecture lessons,
 - b) supervision of skills training,
 - c) review and monitoring of all course instructors and guest instructors to ensure compliance with the course objectives,
 - d) evaluation of student performance and competency during didactic, clinical and field internship training,
 - e) documentation of student performance and competency, and
 - f) orientation of all guest instructors, clinical preceptors and field internship preceptors to the training course objectives consistent with the educational standard for the level of training.
3. The Skill Instructor responsibilities are:
- a) training students in skill objectives,
 - b) evaluation of student performance and competency, and
 - c) documentation of student performance and competency.
4. The Preceptor responsibilities are:
- a) having skills or education consistent with the course objectives,
 - b) direct supervision of students while in the clinical or field internship environment,
 - c) training students in course objectives while in the clinical or field internship environment,
 - d) evaluation of student performance and competency, and
 - e) documentation of student performance and competency.

5. The Course Medical Director responsibilities are:
 - a) complete oversight and authority of the training program,
 - b) verification of competency of all students,
 - c) approving individuals as clinical and field internship preceptors,
 - d) approval of all clinical and field internship sites and
 - e) authorizing all Advanced EMT-A and Paramedic students to take the certification exam upon successful course completion.

C. Equipment

1. Training programs will have access to equipment and training aids related to all skill objectives within the curricula.

D. Facilities

1. Classroom facilities used for EMS training programs are required to be conducive to a learning environment. This includes adequate environmental control and availability of space relative to the number of students and type of course.
2. Clinical facilities are locations where students perform the psychomotor objectives learned in the classroom on actual patients. Clinical facilities are required to be appropriate to the objectives of the training program.

E. Records

1. Student Records
2. Administrative Records
3. Instructor Records

F. Approved Curricula

1. The State Health Officer approves all training curricula for use in EMS initial certification and refresher courses.
2. Training programs are required to use the approved curricula.

3. Sponsoring agencies wanting to conduct a course for initial certification or refresher training by following a curriculum or course of study which has not been approved by the State Health Officer are required to submit for review by the EMS Bureau, the Emergency Medical Services Advisory Committee (EMSAC), and the Board of Medicine the following:
 - a) the proposed curricula and training program, and
 - b) a comparison review of approved curricula and proposed curricula.
4. Proposed curricula or training program changes may be initiated by the sponsoring agency through the EMS Bureau Regional Office.

II. TRAINING PROGRAM ADMINISTRATIVE PROCEDURES

A. All Courses

1. The course coordinator is responsible for ensuring compliance with the administrative procedures.
2. Initial certification and refresher training programs require course application and EMS Bureau approval prior to conducting the training.
3. Training programs will be based on and encompass the entire approved curriculum for the level of training course being taught.
4. The most current version of the following standardized forms will be provided to the course coordinator upon course approval. The original course records will be submitted to the EMS Bureau as directed below:
 - a) "Course Beginning Roster": Completed by the course coordinator at the first scheduled class meeting and submitted to the EMS Bureau Regional Office within 10 days of the course start date,
 - b) "Master Course Attendance Record": Completed by the course coordinator or instructor at each session. Will be submitted to the EMS Bureau Regional Office within 10 days of course completion and prior to the students sitting for the certification exam,
 - c) "Master Skills Proficiency Record": To be completed by the primary instructor. Will be submitted to the EMS Bureau Regional Office within 10 days of course completion and prior to the students sitting for the certification exam,
 - d) "Course Completion Record": Completed by the course coordinator. Will be submitted to the EMS Bureau Regional Office within 10 days of course completion and prior to the students sitting for the certification exam. All students listed on the "Course Beginning Roster" are to be listed on the "Course Completion Record" with those students who do not complete the course noted in the appropriate column.
5. The following additional class records are required to be kept by the course coordinator and may be reviewed as requested by the EMS Bureau:
 - a.) "Master Course Schedule" includes the course schedule, as originally approved, with any changes attached such as, cancelled classes, additional classes held, dates they were held and instructors who were present.

- b) "Class Attendance Record" (per session) to include dates classes were held, lesson number, and signatures of those attending including student, instructors and skill instructors.
 - c) "Make-up Document" verifies all course objectives were achieved for each student who missed class; date of make-up session; objective(s) being taught, student and instructor signature. Make-up sessions must be completed prior to course ending date.
 - d) "Remediation Document" that verifies all course objectives were achieved for each student who failed to demonstrate, by written examination or skill evaluation, achievement of any objective during regularly scheduled class time; to include remediation action plan, date(s) and time of remediation session, performance evaluation, student and instructor signature. Remediation sessions must be completed prior to course ending date.
 - e) "Individual Skill Evaluation Sheet" that documents the evaluation of each specific skill contained in the curriculum, pass/fail criteria, student name, student performance, date of evaluation, student and instructor signature.
 - f) Quizzes / Tests / Exams: a copy of each examination administered, student name, pass/fail criteria, individual student score and date administered.
- 6. The documentation for all courses is to be kept on file by the sponsoring agency for not less than 4 years.
 - 7. The course number will be utilized on all documents, records and correspondence pertaining to the approved course.
 - 8. The sponsoring agency will issue course completion certificates to students who:
 - a) meet attendance requirements,
 - b) demonstrate competency in all didactic and psychomotor training objectives,
 - c) successfully complete all clinical and internship requirements, and
 - d) complete all other training program requirements for course completion.
 - 9. Course completion certificates will include:
 - a) type of course,

- b) name of the sponsoring agency,
- c) full name of student,
- d) EMS Bureau course approval number,
- e) course location,
- f) course completion date,
- g) printed name of course coordinator, and
- h) signature of course coordinator.

10. The course coordinator will attend an Idaho EMS Bureau Instructor Orientation course or equivalent. The course coordinator will be oriented to the current *EMS Training Standards Manual* and NHTSA curriculum and/or Idaho approved curriculum before the course starts.

B. Additional Procedures for Advanced EMT-A Courses

1. Medical director approval is required of preceptors utilized in clinical and/or field internship training.
2. Identify clinical and/or field internship training locations and submit with course application documents.
3. Submit copies of written agreements with appropriate clinical and/or field internship training sites before students begin clinical or field internship containing:
 - a) location and effective dates,
 - b) areas of access, and
 - c) allowable skills.
4. Preceptors are required to be oriented to the clinical and/or field internship objectives. Documentation of preceptor orientation to the training program should be kept on file by the course coordinator. Orientation must occur before students arrive for training and must be consistent with scope of practice.
5. Skill instructors require approval by the course medical director based on credentials for the objectives being taught.

6. Guest instructors require approval by the course medical director based on credentials for the objectives being taught.
7. The sponsoring agency will maintain records verifying completion of the clinical and/or field internship objectives.

C. Additional Procedures for EMT-Paramedic Courses

1. Medical director approval is required of preceptors utilized in clinical and/or field internship training.
2. Identify clinical and/or field internship training locations and submit with course application documents.
3. Submit copies of written agreements with appropriate clinical and/or field internship training sites before students begin clinical or field internship containing:
 - a) location and effective dates,
 - b) areas of access, and
 - c) allowable skills.
4. Preceptors are required to be oriented to the clinical and field internship objectives. Documentation of preceptor orientation to the training program to be kept on file by the course coordinator. Orientation must occur before students arrive for training and must be consistent with scope of practice
5. Skill instructors require approval by the course medical director based on credentials for the appropriate objectives being taught.
6. Guest instructors require approval by the course medical director based on credentials for the appropriate objectives being taught.
7. Clinical and field internship records verifying compliance with the training objectives will include individual patient contact records detailing:
 - a) name of student,
 - b) date of contact,
 - c) incident information,
 - d) patient care provided,

- e) preceptor name, evaluation comments, and signature, and
 - f) student signature.
8. Summary records verifying that all clinical and field internship objectives were accomplished for each student will be submitted as part of the course completion documentation.

D. Changes To An Approved Course

1. The course coordinator will notify the EMS Bureau Regional Consultant of proposed changes to an approved course prior to initiating the change.
2. Proposed changes will be in compliance with the *Training Standards Manual* and approved curriculum.

III. COURSE APPROVAL PROCESS

A. Course Application Procedures

1. The sponsoring agency will use the most current standardized application which is available from the EMS Bureau Regional Office or from the Idaho EMS Bureau website.
2. Initial certification and refresher training courses require application and EMS Bureau approval prior to conducting training.
3. The completed application, including all supporting documents, will be submitted to the appropriate EMS Bureau Regional Office.
 - a) The sponsoring agency should allow at least thirty (30) days for course approval after submission of all required documents for FR, EMT-B and AEMT-A.
 - b) Paramedic courses require initial application sixty (60) days in advance for course approval.
4. Prior to course approval being granted, Advanced EMT-A and Paramedic initial course applications require a course planning meeting. Participants will include the course coordinator, primary instructor, medical director, and regional consultant to review course requirements and educational standards.

B. Bureau Review of Course Applications

1. Upon receipt of a course application, the regional consultant will verify compliance with the current *Training Standards Manual* and approved curricula.
2. The regional consultant may contact the course coordinator for any clarifications.
3. The regional consultant may submit a course review to the EMS Bureau Provider Resources Coordinator and request assistance in determining compliance with *Training Standards Manual* and approved curricula.
4. The regional consultant will notify the course coordinator of approval and course number.

IV. TRAINING STANDARDS

The course coordinator, primary instructor, and medical director are responsible to assure minimum training standards are maintained throughout the course.

A. Initial and Refresher Course Standards

1. The course will be conducted under the direction of the primary instructor designated on the application.
2. All students are required to have a core textbook, consistent with the objectives of the approved curriculum.
3. The student to instructor ratio shall be no greater than 6:1 for all psychomotor skills training.
4. All students will be oriented to the functional job position description from the NHTSA DOT approved curriculum no later than the second classroom session.
5. Students will be trained consistent with the current scope of practice as defined in *IDAPA 22.01.06, Board of Medicine Rules for EMS Personnel*.
6. Training credentials and experience of guest instructors will be consistent with the objectives being taught.
7. Students are required to attend 90% of the scheduled class hours for all courses and demonstrate achievement of 100% of course objectives.
8. Make-up training is required of all students missing classes to complete minimum attendance requirements and all course objectives.
9. Remediation training is required for all students who fail to meet minimum proficiency levels.
 - a) Remediation is to be scheduled in addition to the core course and prior to the course ending date.
 - b) Remediation will be accomplished before the student is examined or receives training beyond the module in which the need for remediation was identified.

B. Additional Standards for Specific Levels of Training

1. First Responder - Initial:

- a) First Responder instructors require EMS Bureau approval,
- b) EMS Bureau approved instructors are required to teach 75% of the scheduled course.

2. First Responder - Refresher:

- a) First Responder instructors require EMS Bureau approval,
- b) EMS Bureau approved instructors are required to teach 75% of the scheduled course,
- c) First Responders can attend an EMT-Basic refresher course to meet the refresher requirement for recertification acknowledging that:
 - (1) First Responders attending an EMT-Basic refresher course are required to attend the entire course,
 - (2) scope of practice or level of certification does not change for First Responders who complete an EMT-Basic refresher course,
 - (3) the instructor will differentiate the scope of practice relative to each level of provider attending the refresher course, and
 - (4) an EMT-Basic refresher course taken by a First Responder must have as the primary instructor an EMT-Basic approved instructor.

3. EMT-Basic - Initial:

- a) EMT-Basic instructors require EMS Bureau approval,
- b) EMS Bureau approved instructors are required to teach 75% of the scheduled course,
- c) CPR skills for the Professional Healthcare Provider are pre-requisite for EMT-B students. Essential elements include: patient assessment, scene survey, recovery position, infection control, recognizing a heart attack, Adult, Child & Infant CPR including: 1 & 2 rescuer, mouth-to-mouth, mouth-to-mask, bag-valve mask, conscious and unconscious choking procedures.
- d) Clinical training for the EMT-Basic student must include a minimum of ten (10) EMS patient contacts under the supervision of a preceptor, in either a clinical training site or within a field internship program.

4. EMT Basic – Refresher:

- a) EMT-Basic instructors require EMS Bureau approval,
- b) EMS Bureau approved instructors are required to teach 75% of the scheduled course.

5. Advanced EMT-A – Initial:

- a) Primary instructors require EMS Bureau approval,
- b) Advanced EMT-A courses require medical director oversight and approval,
- c) guest instructors require medical director approval,
- d) students shall be currently certified or eligible for National Registry certification at the EMT- Basic level, to take the Idaho AEMT-A certification examination.
- e) students shall complete and demonstrate competency in the didactic course objectives prior to initiating clinical training,
- f) clinical training will be completed at locations consistent with the objectives of the training program and approved by the course medical director,
- g) students may act only under direct supervision of an approved preceptor during clinical training, and
- g) clinical training will meet the requirements outlined in the approved “Advanced EMT-A Clinical Objectives.” (see Appendix A).

6. Advanced EMT-A – Refresher:

- a) Primary instructors require EMS Bureau approval,
- b) Advanced EMT-A refresher courses require medical director approval and oversight.

7. EMT-Paramedic – Initial:

- a) Primary instructors require EMS Bureau approval,

- b) EMT-Paramedic courses require medical director oversight and approval,
 - c) students shall be currently certified or eligible for National Registry certification at or above the EMT-Basic level, to take the Idaho certification exam.
 - d) students shall complete and demonstrate competency in the didactic course objectives prior to initiating clinical training,
 - e) clinical training will be completed at locations consistent with the objectives of the training program and approved by the course medical director,
 - f) clinical training will meet the requirements outlined in the approved EMT-Paramedic curriculum guide,
 - g) students shall complete and demonstrate competency in the didactic and clinical course objectives prior to initiating field internship,
 - h) students may act only under direct supervision of an approved preceptor during clinical training and field internship.
8. EMT-Paramedic – Refresher:
- a.) A formal refresher course is no longer required for recertification therefore the EMS Bureau no longer establishes criteria for approval.

V. INSTRUCTOR STANDARDS

A. Application and Approval Process

1. An individual seeking approval as an instructor shall submit an instructor application to the EMS Bureau Regional Office, using the most current standardized application which is available from the EMS Bureau Regional Office or from the Idaho EMS Bureau web site.
2. At the time of application for instructor status, an individual shall possess current EMS certification or National Registry registration or professional licensure at or above the level of instructor status being requested. FR and EMT-B instructors require EMS certification for a minimum of 3 years prior to becoming an instructor.
3. The EMS Bureau Certification and Licensure Coordinator will:
 - a) review the application for completeness, verify credentials as listed on the application, and determine equivalency as indicated,
 - b) notify applicant of disposition.

B. Maintaining Instructor Approval

1. Instructor approval is contingent upon maintaining current EMS certification or National Registry registration or professional licensure at or above that level of instructor.

C. First Responder Instructor Qualifications

1. Certification at or above the First Responder level for a minimum of three (3) years.
2. Completion of an Idaho EMS Bureau Instructor Orientation course.

D. EMT-Basic Instructor Qualifications

1. Certification at or above the EMT-Basic level for a minimum of three (3) years.
 - a) certification at the EMT-Basic level is required of any allied health care professional.
2. Completion of an Idaho EMS Bureau Instructor Orientation course.

3. Successful completion of an adult teaching methodology course meeting the requirements of:
 - a) the Idaho Division of Professional-Technical Education/ Emergency Services Training's "Instructional Techniques & Principles" course,
 - b) the NHTSA/DOT EMS Instructor Training Program,
 - c) the FEMA Instructional Presentation Skills, or
 - d) equivalent prepared training session(s) in adult teaching methodology to include such content topics as: the adult learner, learning objectives, learning process, lesson plans, course materials, preparation, teaching aids, teaching methods, and evaluations.
4. Orientation to the current Idaho approved EMT-Basic curriculum by completion of one of the following:
 - a) the 24-hour Idaho EMT-Basic Refresher Course,
 - b) the 1994 DOT curriculum based Idaho EMT-Basic Course, or
 - c) equivalency for curriculum orientation.
5. Determination of equivalency in adult teaching methodology or orientation to the curriculum will be made on a case-by-case basis:
 - a) The EMS Bureau may request additional documentation to facilitate a comparison of equivalency, to include a copy of the course transcript or course completion certificate from the institution conducting the equivalent training and a copy of the learning objectives from the course being considered for equivalency status.

E. Advanced EMT-A Instructor Qualifications

1. Credentials, education or experience corresponding to the knowledge and skills objectives of the Advanced EMT-A. The EMS Bureau may request additional documents to verify qualifications.

F. EMT-Paramedic Instructor Qualifications

1. Credentials, education or experience corresponding to the knowledge and skills objectives of the EMT-Paramedic. The EMS Bureau may request additional documents to verify qualifications.

VI. TRAINING PROGRAM EVALUATION

A. The EMS Bureau Review Process

1. Class visits to monitor compliance with training and educational standards.
2. Student evaluations and satisfaction surveys relating to the training program and instructor performance.
3. Review of student performance on National Registry and other standardized exams.

B. Training Program Evaluation Findings

1. The information obtained from training program evaluations and summary findings will be shared with the course coordinator.
2. Summaries of training program findings may be made available to licensed EMS services and organizations sponsoring EMS training programs upon request.

C. Non-Compliance Issues Statement

1. Sponsoring agencies not in compliance with the Idaho EMS training or educational standards may have course approval revoked or be denied approval of future course.



APPENDIX A

Idaho *EMS* Bureau

Advanced EMT-A Clinical Rotation Objectives

The student shall demonstrate the ability to safely & successfully perform the following skills:

1. Assist patients with medications
2. Endotracheal intubation
3. Gain venous access in all age group patients
4. Monitor blood glucose levels with use of automated devices or reagent strips
5. Monitor oxygen saturation with the use of pulse oximetry
6. Effectively ventilate un-intubated patients of all age groups
7. Perform a comprehensive assessment on pediatric patients
8. Perform a comprehensive assessment on adult patients
9. Perform a comprehensive assessment on geriatric patients
10. Perform a comprehensive assessment on obstetric patients
11. Perform a comprehensive assessment on psychiatric patients
12. Perform a comprehensive assessment, formulate and implement a treatment plan for patients with chest pain
13. Perform a comprehensive assessment, formulate and implement a treatment plan for patients with dyspnea/respiratory distress
14. Perform a comprehensive assessment, formulate and implement a treatment plan for patients with syncope
15. Perform a comprehensive assessment, formulate and implement a treatment plan for patients with altered mental status
16. Serve as a team leader in prehospital situations
17. Comprehensive medical legal documentation relative to the Advanced EMTA scope of practice